

Isolation and Quarantine Action Steps

2005 Statewide Preparedness
Conference

Objectives

- Be able to determine what confinement measures are appropriate during public health events that involve communicable diseases
- Identify action steps needed to successfully place and sustain individuals in isolation or quarantine

Isolation and Quarantine

strategic separation of a person or groups of people to prevent or reduce the transmission of infectious diseases in the community

Purpose

to protect community, health care workers, patients, visitors, local health department staff, community partners from acquiring communicable diseases

Isolation

- separation of symptomatic individuals
- enforced by health care workers in hospitals
- enforced by public health authorities in the community

Quarantine

- separation of asymptomatic individuals
- separation occurs in community
- public health agencies have authority to enforce

Isolation and Quarantine

1. Determine whether and what type of restrictions are appropriate
 - disease specific: mode of transmission, virulence, period of communicability, incubation time, ability to perform contact tracing, work, social, and family considerations, availability of effective prophylaxis/vaccine

Isolation and Quarantine Attachment 7 in PHEP

Disease	Isolation Period	Quarantine
anthrax	N/A	N/A
SARS	symptom onset until 10 days after symptoms improve	HCW exposed during aerosol-generating procedures
influenza	5-7 days after symptom onset	impractical

Isolation/Quarantine Procedures for LHD

2. Determine location where person will be isolated
 - identify potential locations in advance
 - obtain agreements, contracts, MOU for placement and care of individuals in advance
 - know the isolation capabilities of hospitals and other institutions in jurisdiction/border jurisdictions

Isolation/Quarantine Procedures for LHD

2. Determine location where person will be isolated (con't)
 - if not hospitalized, home isolation is first choice if possible
 - evaluate risk of transmission based on home environment and social situations
 - assess for factors that influence ability to comply with confinement

Isolation/Quarantine Procedures for LHD

3. Complete isolation forms and evaluate whether orders are necessary

Isolation/Quarantine Procedures for LHD

4. Determine necessary supportive measures that will aid in compliance
 - education
 - mental health issues
 - basic needs: meds, groceries, bill paying
 - job concerns, maintaining relationships
 - medical care
 - allowed visitors

Isolation/Quarantine Procedures for LHD

5. Ensure compliance with isolation/quarantine
 - daily phone contact
 - visits
6. Education of LHD staff and community partners
 - infection control
 - PPE

Use of Community Facilities

- Depends on:
 - number of cases and contacts
 - morbidity and mortality caused by agent
 - how rapidly the disease is spread
 - whether other prevention/control measures apply
 - resource distribution/use
 - public perception

Attachments from PHEP

9. Voluntary isolation contract
10. Isolation orders form
11. Release from isolation form
12. Sample isolation/quarantine sign

Public Information

Checklist of information to include in press releases, public service announcements, hot lines, other forms of public communications

References

- "Public Health Emergencies in WI: Model Tools to Assist LHD," WI Project for the Mid-America Regional Public Health Leadership Institute, August, 2004
 - <http://www.uic.edu/sph/marphi/>
- WI Public Health Emergency Plan
 - WI Health Alert Network
- "Guide C, Part 2: Quarantine Guidelines," CDC, March, 2002
 - <http://www.bt.cdc.gov/agent/smallpox/response-plan/files/guide-c-part-2.pdf>

Isolation/Quarantine

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??? Questions ???

**STATUTORY PUBLIC HEALTH
POWERS
Communicable Diseases**

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PUBLIC HEALTH POWERS

- Shared Powers
- Department Powers
- Delegated Powers
- Federal Powers

Shared Powers

- Broad powers derive from *State ex rel Nowotny v. City of Milwaukee* (1909)
 - “A health officer who is expected to accomplish any results must necessarily possess large powers and be endowed with the right to take summary action, which at times must trench closely upon despotic rule. The public health cannot wait upon the slow processes of legislative body or the leisurely deliberation of court. . .”

Shared Powers

- The broad power affirmed in *Nowotny* is codified in our statutes today
 - Department has power to do “what is reasonable and necessary for the prevention and suppression of disease” 250.04(1)
 - Department “may authorize and implement all emergency measures

Shared Powers

- Local health officers “may do what is reasonable and necessary for the prevention and suppression of disease” 252.03(2)
- Local health officers “shall promptly take all measures necessary to prevent, suppress and control communicable diseases. . .” 252.03(1)

Shared Powers

- Broad powers must be balanced against individuals' rights
 - the right to be free from restrictions is overcome only when the exercise of governmental power is necessary
 - choose least restrictive measure that will assure public's health
 - least restrictive measure will depend upon the threat to the public's health by the particular communicable disease

Shared Powers

- Responsibility to enforce public health laws
 - Local boards of health shall assure the enforcement of state public health statutes and rules 251.04(1)
 - Violation of laws relating to public health 252.25
 - Violation of laws relating specifically to communicable disease 252.19
 - Refer to Corporation Counsel/District Attorney

Shared Powers

- Responsibility to enforce public health laws
 - Department has powers to enforce public health statutes and rules 250.04
 - If local public health fails to enforce public health laws, the Department may do so
 - If the enforcement is of communicable disease laws, the Department may charge local public health for the expenses incurred in its enforcement 250.04(2)(b) and

Shared Powers

- Local public health powers regarding communicable disease
 - Receive reports of known or suspected communicable disease 252.05
 - May require reporting information in addition to name, sex, age, residence and communicable disease 252.05(4)

Shared Powers

- Local public health powers regarding communicable disease (cont'd)
 - Upon the appearance of a communicable disease, immediately investigate and cause examinations to be made as necessary 252.03(1) and 252.06(3)
 - If the local health officer is not a physician, speedily consult one if there is doubt or advice is needed 252.06(3)

Shared Powers

- Local public health powers regarding communicable disease (cont'd)
 - Timely report information to Department
 - if an outbreak or epidemic occurs, or
 - if a Category I communicable disease is reported, then immediately report to the Department

252.05(6) and (7); HFS 145.04(4)

Shared Powers

- Local public health powers regarding communicable disease (cont'd)
 - Order additional tests if:
 - There is a dispute regarding disease determination;
 - If the disease may have potential public health significance; or,
 - If more extensive testing will aid in the investigation

252.05(9)

Shared Powers

- Local public health powers regarding communicable disease (cont'd)
 - Refer to the District Attorney for prosecution any violation of the reporting requirements 252.05(11)

Shared Powers

- Local public health powers regarding communicable disease (cont'd)
 - May forbid public gatherings when deemed necessary to control outbreaks or epidemics 252.03(2)
 - Including in schools and churches

Shared Powers

- Local public health powers regarding communicable disease (cont'd)
 - If acting as Department-designated agent, may enter any building, vessel or conveyance to inspect and remove any person affected by communicable disease 252.02(1)
 - Requires a special inspection warrant issued under 66.0119

Shared Powers

- Local public health powers regarding communicable disease (cont'd)
 - May order vessel or conveyance stopped anywhere
 - May order train stopped at any station or upon any sidetrack
 - Stopped for as long as necessary

Shared Powers

- Department public health powers regarding communicable disease
 - May exercise the powers permitted local public health through its general powers to do what is reasonable and necessary for the prevention and suppression of disease 250.04(1)
 - Specific statutory authority to restrict public gatherings and inspect private buildings

Shared Powers

- Local public health powers specific to isolation and quarantine
 - May isolate a patient and order quarantine of contacts as may be necessary and as consistent with HFS 145, Wis. Adm. Code 252.06(1)
 - Applies to any communicable disease listed in Appendix A of HFS 145
 - Applies to any other infectious disease which the chief medical officer deems a threat to the public
 - HFS 145.06(1)

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - Isolation = separation of persons who have a specific infectious illness from those who are healthy and the restriction of their movement to stop the spread of that illness
 - Quarantine = separation and restriction of movement of persons who, while not yet ill, have been exposed to an infectious agent and therefore may become infectious
 - From CDC website

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - May act if a person is known to have a contagious medical condition which poses a threat to others HFS 145.06(4)
 - May act if a person is suspected of having a contagious medical condition which poses a threat to others HFS 145.06(4)

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - Under HFS 145.06(2), a person is considered to have a known contagious medical condition which poses a threat if:
 - The person has been medically diagnosed and
 - Exhibits any one of six behaviors listed in HFS 145.06(2)

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - Listed behaviors:
 - Person has transmitted the disease or shown a careless disregard of transmission; or
 - Past behavior shows substantial likelihood that person will transmit or past statements credibly show an intent to transmit; or
 - Refuses to follow medical regimen to make disease non-contagious

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - Listed behaviors (cont'd):
 - Inability to complete a medical regimen to make disease non-contagious as demonstrated by any of the following:
 - Diminished capacity for AODA reasons
 - Significantly below average intelligence
 - Organic brain or psychiatric disorder
 - A minor or ward under guardianship

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - Listed behaviors (cont'd):
 - Person misrepresented substantial facts regarding medical history or behavior and such misrepresentation is epidemiologically shown to increase the threat of transmission
 - Any other willful act(s) or conduct that is epidemiologically shown to increase the threat of transmission

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - Under HFS 145.06(3), a person is suspected of having a known contagious medical condition which poses a threat if:
 - The person exhibits any one of six behaviors listed in HFS 145.06(2) and
 - Demonstrates any one of three criteria without refuting medical evidence:

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - Criteria:
 - Has been exposed to a known communicable disease
 - Has clinical lab findings indicative of a communicable disease, or
 - Exhibits symptoms consistent with a communicable disease

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - May issue one or more of the seven directives listed in HFS 145.06(4) if a person is known to have or is suspected of having a contagious medical condition that poses a threat
 - To impose only what is reasonable and necessary means that the chosen directives must fit the particular communicable disease and the behaviors presented

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - Seven possible directives:
 - Participate in education or counseling
 - Participate in treatment
 - Undergo tests and exams to identify, monitor and evaluate disease
 - Notify or appear before local health official to verify status, testing or direct observation of treatment

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - Seven possible directives (cont'd)
 - Stop conduct or employment that is a threat to others
 - Reside part-time or full-time in an isolated or segregated setting
 - Be placed in an appropriate institutional treatment facility until noninfectious

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - A court order is not necessary if a person voluntarily complies with a directive
 - If a person fails to comply, the official who issued the directive may petition a court to order compliance HFS 145.06(5)
 - Note: There is a more specific, and different, process that must be followed regarding tuberculosis 252.07

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - Work with Corporation Counsel to draft a petition that includes facts to establish:
 - The person was given the directive in writing;
 - The directive included the reasons for giving the directive and the evidence supporting those reasons;
 - The person has had the opportunity to seek counsel; and
 - The directive is the least restrictive that would serve to correct the situation and

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - The allegations upon which the directive is based must be proved by clear and convincing evidence:
 - That the person has a medically diagnosed communicable disease;
 - That the communicable disease is listed in Appendix A or deemed such by the CMO;

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - Allegations (cont'd)
 - That the person exhibited the behaviors in HFS 145.06(2);
 - That the person, if only suspected of having a contagious condition, exhibited the behaviors in HFS 145.06(2) and the HFS 145.06(3)

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - If property or animals and their environs present a threat of transmitting an Appendix A or CMO-deemed communicable disease, local public health may direct the person who owns or controls the property or animals to do what is reasonable and necessary to abate the threat of transmission. HFS 145.06(6)

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - If deemed necessary, forbid direct contact with a patient in isolation or quarantine by anyone other than:
 - Local health officer and representative
 - Attending physicians and nurses
 - Clergy
 - Immediate family
 - Those with special permit from local health officer
- 252.06(4)(a)

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - During a Governor-declared public health emergency, only a person authorized by the public health authority may enter isolation or quarantine premises 252.06(4)(b)1.
 - Anyone who enters may also be subject to isolation or quarantine 252.06(4)(b)3.

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - May employ quarantine guards if an intent to violate a quarantine order is shown 252.06(5)
 - Guards must be sworn in
 - Guards have police powers to use all necessary enforcement means
 - authority to direct the conduct of others

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - If necessary, may remove a person to a separate place who needs to be quarantined/restricted 252.06(6)
 - Only if removal would not endanger the person's health

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - May order the removal to a hospital or other place of a person confined in a jail, prison, mental health institute or other place of detention if the person has a disease that the local health officer deems dangerous to other residents or neighbors 252.06(6)(b)

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - Must ensure that the person is securely detained
 - Must return the person upon recovery
 - If the person is under commitment or process, give a copy of the removal order to the involved court

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - Expenses of isolation and quarantine 252.06(10)
 - Medical, food and other basic expenses for care of the infected person are the responsibility of the person
 - Local public health may need to incur expenses and charge back

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - Expenses of isolation and quarantine (cont'd)
 - Local public health responsible for costs of:
 - Quarantine guards
 - Maintaining quarantine
 - Exams and tests ordered by local health officer
 - Costs of basic care provided a dependent of the infected person

Shared Powers

- Local public health powers specific to isolation and quarantine (cont'd)
 - Expenses of isolation and quarantine (cont'd)
 - Expenses of quarantining a person outside his or her home during a Governor-declared public health emergency will be paid by state appropriations 252.06(10)(c)
 - Keep records of expenses for reimbursement if not directly paid by state agency

Shared Powers

- Department powers specific to isolation and quarantine
 - Same powers as local public health 252.06

Department Powers

- May promulgate rules and issue orders that supersede conflicting or less stringent local public health ordinances and orders 252.02(4)
- Be lead state agency under a Governor-declared public health emergency 166.03(1)(b)1.

Department Powers

- If lead state agency during a public health emergency, the Department shall serve as the public health authority and shall ensure an incident command system is used 250.042(1)
 - The role and independent authority of local public health that otherwise exists may change under the management of the public health emergency through the incident command system

Department Powers

- As public health authority, Department may
 - Order compulsory vaccination if necessary, unless it would reasonably likely lead to serious harm to the individual or the individual objects on religious grounds or as a matter of conscience 252.041(1)(a)
 - Isolate or quarantine any person who is unable or unwilling to receive a compulsory vaccination 252.041(1)(b)

Department Powers

- Public health authority (cont'd)
 - Purchase, store or distribute pharmaceutical agents and medical supplies to aid in controlling the public health emergency
 - Inform the public when an emergency has been declared and terminated, how the public should protect itself and what the Department is doing to control the emergency
 - Consult with local public health

250.042(2)

Delegated Powers

- The Department may delegate to local public health certain powers. If it does, local public health may do the following:
 - Perform as the public health authority in a public health emergency 250.042(1) and 251.05(3)(e)
 - Order compulsory vaccinations under 252.041 and isolate or quarantine those unwilling or unable to receive a compulsory vaccination
 - Enter a building, vessel or conveyance under a special inspection warrant 252.02(1)

Federal Powers

- Centers for Disease Control and Prevention may detain, restrict travel and medically examine persons suspected of carrying a communicable disease if the disease is listed in a Presidential Executive Order
 - Applies to international and interstate travelers

Federal Powers

- CDC may intervene in intrastate control of communicable diseases in the event of inadequate local control
- CDC may not order compulsory vaccinations
